

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

DISTRICT OF NEW JERSEY

Case number (if known)

Chapter you are filing under:

☐ Chapter 7

☐ Chapter 11

☐ Chapter 12

☒ Chapter 13

☐ Check if this an amended filing

# Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Identify Yourself

#### About Debtor 1:

#### About Debtor 2 (Spouse Only in a Joint Case):

#### 1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

**Paul**

First name

**T**

Middle name

**Von Nessi**

Last name and Suffix (Sr., Jr., II, III)

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

#### 2. All other names you have used in the last 8 years

Include your married or maiden names.

**Paul VonNessi**  
**Paul T von Nessi**

#### 3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

**xxx-xx-9514**

Debtor 1 **Paul T Von Nessi**

Case number (if known)

**About Debtor 1:**

**About Debtor 2 (Spouse Only in a Joint Case):**

**4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

☒ I have not used any business name or EINs.

☐ I have not used any business name or EINs.

Include trade names and *doing business as* names

Business name(s)

Business name(s)

EINs

EINs

**5. Where you live**

**24 Walnut Court  
South Orange, NJ 07079**

Number, Street, City, State & ZIP Code

**Essex**

County

**If your mailing address is different from the one above, fill it in here.** Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

**If Debtor 2 lives at a different address:**

Number, Street, City, State & ZIP Code

County

**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

**6. Why you are choosing this district to file for bankruptcy**

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason.  
Explain. (See 28 U.S.C. § 1408.)

Debtor 1 **Paul T Von Nessi**

Case number (if known)

**Part 2: Tell the Court About Your Bankruptcy Case**

7. **The chapter of the Bankruptcy Code you are choosing to file under** *Check one.* (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)*). Also, go to the top of page 1 and check the appropriate box.
- ☐ Chapter 7
- ☐ Chapter 11
- ☐ Chapter 12
- ☒ Chapter 13
- 
8. **How you will pay the fee** ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).
- ☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.
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9. **Have you filed for bankruptcy within the last 8 years?** ☒ No.
- ☐ Yes.
- |          |       |      |       |             |       |
|----------|-------|------|-------|-------------|-------|
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |
- 
10. **Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?** ☒ No.
- ☐ Yes.
- |                       |       |                     |       |
|-----------------------|-------|---------------------|-------|
| Debtor                | _____ | Relationship to you | _____ |
| District              | _____ | When                | _____ |
| Case number, if known | _____ |                     |       |
| Debtor                | _____ | Relationship to you | _____ |
| District              | _____ | When                | _____ |
| Case number, if known | _____ |                     |       |
- 
11. **Do you rent your residence?** ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 **Paul T Von Nessi**

Case number (if known)

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

☒ No. Go to Part 4.

☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

\_\_\_\_\_  
Name of business, if any

\_\_\_\_\_  
Number, Street, City, State & ZIP Code

*Check the appropriate box to describe your business:*

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines.* If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

☒ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

☒ No.

☐ Yes. What is the hazard? \_\_\_\_\_

If immediate attention is needed, why is it needed? \_\_\_\_\_

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

Where is the property? \_\_\_\_\_

\_\_\_\_\_  
Number, Street, City, State & Zip Code

Debtor 1 **Paul T Von Nessi**

Case number (if known)

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.**  
I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.**  
My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.**  
I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **Paul T Von Nessi**

Case number (if known)

**Part 6: Answer These Questions for Reporting Purposes**

16. What kind of debts do you have?	16a.	<b>Are your debts primarily consumer debts?</b> <i>Consumer debts</i> are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> No. Go to line 16b. <input checked="" type="checkbox"/> Yes. Go to line 17.
	16b.	<b>Are your debts primarily business debts?</b> <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. <input type="checkbox"/> No. Go to line 16c. <input type="checkbox"/> Yes. Go to line 17.
	16c.	State the type of debts you owe that are not consumer debts or business debts

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17. Are you filing under Chapter 7?	<input checked="" type="checkbox"/> No.	I am not filing under Chapter 7. Go to line 18.
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	<input type="checkbox"/> Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input type="checkbox"/> No <input type="checkbox"/> Yes

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18. How many Creditors do you estimate that you owe?	<input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000
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19. How much do you estimate your assets to be worth?	<input checked="" type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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20. How much do you estimate your liabilities to be?	<input type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input checked="" type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million	<input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million	<input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion
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**Part 7: Sign Below****For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**/s/ Paul T Von Nessi****Paul T Von Nessi**

Signature of Debtor 1

Signature of Debtor 2

Executed on **2/01/2019**

MM / DD / YYYY

Executed on

MM / DD / YYYY

Debtor 1 **Paul T Von Nessi**

Case number (if known)

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**/s/ HERBERT B. RAYMOND, ESQ.**

Date

**2/01/2019**

Signature of Attorney for Debtor

MM / DD / YYYY

**HERBERT B. RAYMOND, ESQ. HR#1379**

Printed name

**HERBERT B. RAYMOND, ESQ.**

Firm name

**7 GLENWOOD AVENUE  
SUITE 408  
EAST ORANGE, NJ 07017**

Number, Street, City, State & ZIP Code

Contact phone **973-675-5622**

Email address

**BANKRUPTCY123@COMCAST.NET**

**HR#1379 NJ**

Bar number & State

American Honda Finance  
Attn: Bankruptcy  
PO Box 168088  
Irving, TX 75016

Bostwick Laboratories  
PO Box 403751  
Atlanta, GA 30384

Hackensack Non-invasive Vascular La  
PO Box 34910  
Newark, NJ 07189

American Honda Finance  
201 Little Falls Drive  
Wilmington, DE 19808

Bureau of Account Management  
Attn: Bankruptcy  
PO Box 538  
Howell, NJ 07731

Hackensack University  
PO Box 8505  
Pompano Beach, FL 33075

ARstrat  
Po Box 33720  
Detroit, MI 48232

Bureau of Account Management  
3601 Us Highway 9  
Howell, NJ 07731

Hackensack University MC  
PO Box 30700  
New York, NY 10087

ARstrat  
9800 Centre Parkway  
Suite 1100  
Houston, TX 77036

Bureau of Accounts Control  
PO Box 538  
Howell, NJ 07731

Hackensack University MC  
PO Box 30700  
New York, NY 10087

Bank Of America  
4909 Savarese Circle  
Tampa, FL 33634

Business Revenue Systems, Inc.  
PO Box 13077  
Des Moines, IA 50310

Hackensack University Medical Cen  
PO Box 48028  
Newark, NJ 07101

Bank Of America  
PO Box 982238  
El Paso, TX 79998

Celentano. Stadtmauer & Walentowicz  
PO Box 2594  
Clifton, NJ 07015-2594

Hackensack University Medical Cen  
30 Prospect Street  
Hackensack, NJ 07601

Bank of America  
PO Box 530082  
Atlanta, GA 30353-0802

Celentano. Stadtmauer & Walentowicz  
PO Box 2594  
1035 Route 46  
Clifton, NJ 07015-2594

Hackensack University Medical Cen  
30 Prospect Street  
PO Box 48028  
Hackensack, NJ 07601

Bank of America  
Attn: Bankruptcy  
PO Box 26012  
Greensboro, NC 27410

Credit Bureau of Lancaster County Inc.  
PO Box 1271  
Lancaster, PA 17606

Hackensack University Medical Cen  
30 Prospect Street  
Hackensack, NJ 07601

BCA Financial Services  
PO Box 1037  
Bloomfield, NJ 07003

Forman and Hertz, MD  
1500 Pleasant Valley Way  
Suite 302  
West Orange, NJ 07052

Hackensack University Medical Cen  
PO Box 48027  
Newark, NJ 07101

BCA Financial Services  
18001 Old Cutter Road  
Suite 462  
Miami, FL 33157

Hackensack Non-invasive Vascular Lab  
PO Box 9500-4590  
Philadelphia, PA 19195

Hackensack University Medical Gro  
PO Box 9500-4535  
Philadelphia, PA 19195



Hackensack University Medical Group  
PO Box 9500-4535  
Philadelphia, PA 19195

IRS  
PO Box 219236  
Kansas City, MO 64121

New Jersey Healthcare Specialist P  
PO Box 419378  
Boston, MA 02241

Honda  
National Service Center  
PO Box 165378  
Irving, TX 75016

IRS  
PO Box 9019  
Holtsville, NY 11742

New Jersey Healthcare Specialist P  
PO Box 417191  
Boston, MA 02241

Honda Finance  
PO Box 7829  
Philadelphia, PA 19101-7870

Macy's  
PO Box 78008  
Phoenix, AZ 85062

New Jersey Imaging Network  
27695 Network Place  
Chicago, IL 60673

Imaging Consultants of Essex, P.A.  
PO Box 3247  
Indianapolis, IN 46206

Macy's  
9111 Duke Blvd.  
Mason, OH 45040

NJ Urology  
1515 Broad Street  
Suite B130  
Bloomfield, NJ 07003

Imaging Consultants of Essex, P.A.  
PO Box 371863  
Pittsburgh, PA 15250

Macy's Bankruptcy  
PO Box 8053  
Mason, OH 45040

NJ Urology  
PO Box 95000  
Philadelphia, PA 19195

Internal Revenue Service  
PO Box 7346  
Philadelphia, PA 19114

Macy's Visa  
PO Box 745012  
Cincinnati, OH 45274

Northfield Bank  
581 Main Street  
Suite 810  
Woodbridge, NJ 07095

Internal Revenue Service  
PO Box 57  
Bensalem, PA 19020

Macy's Visa  
PO Box 9001108  
Louisville, KY 40208

Northfield Bank Loan Dept.  
581 Main Street  
Suite 810  
Woodbridge, NJ 07095

Internal Revenue Service  
Philadelphia, PA 19255-0010

Mountainside Hospital  
PO Box 30700  
New York, NY 10087

Northfield Bank Loan Servicing Dep  
581 Main Street  
Suite 810  
Woodbridge, NJ 07095

Internal Revenue Service  
ACS Support  
PO Box 219236  
Kansas City, MO 64121

NCO  
PO Box 41567  
Philadelphia, PA 19101

Northfield Bank NA  
581 Main Street  
Suite 810  
Woodbridge, NJ 07095

IRS  
PO Box 804527  
Cincinnati, OH 45280

NCO  
507 Prudential Road  
Horsham, PA 19044

Online Collections  
Attn: Bankruptcy  
PO Box 1489  
Winterville, NC 28590

Online Collections  
Attn: Bankruptcy  
PO Box 1489  
Winterville, NC 28590

Saint Barnabas Health Care Systems  
PO Box 903  
Oceanport, NJ 07757

Santander Bank  
2 Morrissey Boulevard  
Boston, MA 02125

Online Collections  
Attn: Bankruptcy  
Po Box 1489  
Winterville, NC 28590

Saint Barnabas Hospital  
94 Old Short Hills Rd.  
Livingston, NJ 07039

Santander Bank Na  
75 State Street  
Boston, MA 02109

Online Collections  
Pob 1489  
Winterville, NC 28590

Saint Barnabus EMA  
PO Box 6251  
Parsippany, NJ 07054

Savit Collection Agency  
Attn: Bankruptcy  
PO Box 250  
East Brunswick, NJ 08816

Online Collections  
202 W Firetower Road  
Winterville, NC 28590

Saint Barnbas Medical Center  
PO Box 18623  
Newark, NJ 07191-8623

SaVit Collection Agency  
Po Box 250  
East Brunswick, NJ 08816

Online Collections  
4917 Professional Center  
Raleigh, NC 27609

Santander  
PO Box 660633  
Dallas, TX 75266

Shapiro & Denardo  
14000 Commerce Parkway  
Suite B  
Mount Laurel, NJ 08054

Online Collections  
Pob 1489  
Winterville, NC 28590

Santander  
PO Box 16255  
Reading, PA 19612

Shapiro & Denardo LLC  
14000 Commerce Parkway  
Suite B  
Mount Laurel, NJ 08054

Online Collections  
Pob 1489  
Winterville, NC 28590

Santander  
601 Penn Street  
Reading, PA 19601

Sovereign Bank  
PO Box 12646  
Reading, PA 19612

Online Collections  
Pob 1489  
Winterville, NC 28590

Santander  
PO Box 12768  
Reading, PA 19612

Sovereign Bank  
1130 Berkshire Blvd  
3rd Floor  
Wyomissing, PA 19610

Online Collections Inc  
Attn: Bankruptcy  
PO Box 1489  
Winterville, NC 28590

Santander Bank  
2 Morrissey Boulevard  
Boston, MA 02125

St. Barnabas Medical Center  
2 Crescent Place  
Oceanport, NJ 07757

Revenue Systems Inc.  
PO Box 13077  
Des Moines, IA 50310

Santander Bank  
1130 Berkshire Bv  
Wyomissing, PA 19610

St. Barnabus EMA  
PO Box 417442  
Boston, MA 02241

St. Barnabus Healthcare  
PO Box 29965  
New York, NY 10087

Summit Medical Group  
PO Box 19000  
Belfast, ME 04915

Vengroff, Williams and Associates  
PO Box 4155  
Sarasota, FL 34230

St. Barnabus Healthcare  
Po Box 32053  
New York, NY 10087

Summit Medical Group  
PO Box 14099  
Belfast, ME 04915

Vengroff, Williams and Associates  
777 Larkfield Road  
Commack, NY 11725

State of New Jersey  
Division of Taxation  
50 Barrack Street, P.O. Box 269  
Trenton, NJ 08646

Toyota Motor Credit  
PO Box 5856  
Carol Stream, IL 60197

Visa Dept Store National Bank/Mac  
Attn: Bankruptcy  
PO Box 8053  
Mason, OH 45040

State of New Jersey  
Division of Taxation  
Bankruptcy Section  
PO Box 245  
Trenton, NJ 08646-0245

Toyota Motor Credit  
PO Box 2730  
Torrance, CA 90509

Visa Dept Store National Bank/Mac  
Po Box 8218  
Mason, OH 45040

State of New Jersey  
Division of Taxation  
153 Halsey Street  
Newark, NJ 07101

Toyota Motor Credit Company  
Toyota Financial Services  
PO Box 8026  
Cedar Rapids, IA 52408

Wells Fargo Bank  
Attn: Collections Manager  
7000 Vista Drive  
West Des Moines, IA 50266

State of New Jersey  
Division of Revenue  
PO Box 262  
Trenton, NJ 08646

Toyota Motor Credit Corporation  
Attn: Asset Protection Department  
PO Box 2958  
Torrance, CA 90509-2958

Wells Fargo Bank  
PO Box 1225  
Charlotte, NC 28201-1225

State of New Jersey  
Division of Revenue  
PO Box 262  
Trenton, NJ 08646-0262

Toyota Motor Credit Corporation  
19001 South Western Avenue, TC13  
Torrance, CA 90509-2958

Wells Fargo Bank  
PO Box 28724  
Kansas City, MO 64118

State of New Jersey  
Bankruptcy Unit  
50 Barrack Street  
PO Box 245  
Trenton, NJ 08695-0267

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